

# HOUSE . . . . . No. 4144

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House bill No. 4132, as changed by the committee on Bills in the Third Reading, and as amended and passed to be engrossed by the House. May 31 and June 4, 2012.

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## The Commonwealth of Massachusetts

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In the Year Two Thousand Twelve  
\_\_\_\_\_

An Act making appropriations for the fiscal year 2012 to provide for supplementing certain existing appropriations and for certain other activities and projects.

*Whereas*, The deferred operation of this act would tend to defeat its purposes, which are forthwith to make supplemental appropriations for fiscal year 2012 and to make certain changes in law, therefore it is hereby declared to be an emergency law, necessary for the immediate preservation of the public convenience.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1     SECTION 1. To provide for supplementing certain items in the general appropriation act and other  
2     appropriation acts for fiscal year 2012, the sums set forth in section 2 are hereby appropriated from the  
3     General Fund unless specifically designated otherwise in this act or in those appropriation acts, for the  
4     several purposes and subject to the conditions specified in this act or in those appropriation acts, and  
5     subject to the laws regulating the disbursement of public funds for the fiscal year ending June 30, 2012.  
6     These sums shall be in addition to any amounts previously appropriated and made available for the  
7     purposes of those items.

8             SECTION 2.

9                     DISTRICT ATTORNEY

|    |           |   |              |
|----|-----------|---|--------------|
| 10 |           | <i>Hampden District Attorney</i>  |              |
| 11 | 0340-0598 | .....   | \$70,000     |
| 12 |           | <i>Bristol District Attorney</i>  |              |
| 13 | 0340-0998 | .....   | \$25,000     |
| 14 |           | <i>Berkshire District Attorney</i>  |              |
| 15 | 0340-1198 | .....   | \$53,780     |
| 16 |           |   |              |
| 17 |           | <b>OFFICE OF THE TREASURER AND RECEIVER GENERAL</b>   |              |
| 18 | 0610-2000 | .....   | \$250,000    |
| 19 |           | <b>STATE ETHICS COMMISSION</b>  |              |
| 20 |           | <i>State Ethics Commission</i>  |              |
| 21 | 0900-0100 | .....   | \$60,000     |
| 22 |           | <b>EXECUTIVE OFFICE OF ADMINISTRATION AND FINANCE</b>   |              |
| 23 |           | <i>Reserves</i>   |              |
| 24 | 1599-3384 | .....   | \$3,100,000  |
| 25 |           |   |              |
| 26 | 2000-0100 | For a reserve to meet the cost of proactive eradication and control of larvicide                  |              |
| 27 |           | mosquitoes, in order to prevent the spread of eastern equine encephalitis in Bristol and Plymouth |              |
| 28 | Counties  | .....   | \$200,000    |
| 29 |           |   |              |
| 30 |           | <b>EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES</b>  |              |
| 31 |           | <i>Department of Public Health</i>  |              |
| 32 | 4512-0225 | .....   | \$270,000    |
| 33 |           |   |              |
| 34 |           | <b>EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES</b>  |              |
| 35 |           | <i>Department of Developmental Services</i>   |              |
| 36 | 5930-1000 | .....   | \$10,564,865 |

37  
38 EXECUTIVE OFFICE OF PUBLIC SAFETY AND HOMELAND SECURITY  
39 *Department of State Police*  
40 8100-1001 ..... \$1,800,000  
41

42 EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY  
43 *Military Division*  
44 8700-1150 ..... \$3,000,000

45 *Franklin Sheriff's Office*  
46 8910-0108 ..... \$300,000

47 *Barnstable Sheriff's Office*  
48 8910-8200 ..... \$600,000

49 *Bristol Sheriff's Office*  
50 8910-8300 ..... \$900,000

51 *Dukes Sheriff's Office*  
52 8910-8400 ..... \$36,000

53 *Plymouth Sheriff's Office*  
54 8910-8700 ..... \$4,600,000

55 SECTION 2A. To provide for certain unanticipated obligations of the commonwealth, to provide  
56 for an alteration of purpose for current appropriations, and to meet certain requirements of law, the sums  
57 set forth in this section are hereby appropriated from the General Fund unless specifically designated  
58 otherwise in this section, for the several purposes and subject to the conditions specified in this section,  
59 and subject to the laws regulating the disbursement of public funds for the fiscal year ending June 30,  
60 2012. These sums shall be in addition to any amounts previously appropriated and made available for the  
61 purposes of those items.

62 EXECUTIVE OFFICE FOR ADMINISTRATION AND FINANCE  
63 *Office of the Secretary of Administration and Finance*

64 1599-4278 For a reserve to meet the fiscal year 2012 costs of salary adjustments and other economic  
65 benefits authorized by the collective bargaining agreement between the commonwealth and  
66 the Coalition for Public Safety Unit 5, at the alcoholic beverages control  
67 commission.....\$9,848

68 1599-4303 For a reserve to meet the fiscal year 2012 costs of salary adjustments and other economic  
69 benefits authorized by the collective bargaining agreement between the Barnstable county  
70 sheriff's department and the American Federation of State, County and Municipal  
71 Employees, Local 1462C, AFL /AFL-CIO, Council 93, Local  
72 1462C.....\$12,689

73 1599-7050 For a reserve to evaluate the retiree health care cost valuation of cities and towns in the  
74 commonwealth; provided, that funds from this items may be used by the public employee  
75 retirement administration commission in agreement with section 57 of chapter 68 of the acts  
76 of 2011.....\$40,000  
77

78 1599-7051 For a reserve to evaluate the retiree health care cost valuation in the Commonwealth;  
79 provided, that funds from this items may be used by the Health Care Security Trust  
80 for the study of the operation and structure of the group insurance commission or  
81 any other aspects of employee healthcare in agreement with section  
82 58 of chapter 176 of the acts of 2011.....\$150,000

83 EXECUTIVE OFFICE OF EDUCATION

84 *Department of Higher Education*

85 7077-0024 For a contract with the Cummings School of Veterinary Medicine at Tufts University;  
86 provided, that funds appropriated in this item shall be expended for workforce training  
87 support targeted to specific skills required within the life sciences  
88 sector.....\$210,000

89 SECTION 2C.I. For the purpose of making available in fiscal year 2013 balances of  
90 appropriations which otherwise would revert on June 30, 2012, the unexpended balances of the

maintenance appropriations listed below, not to exceed the amount specified below for each  
 item, are hereby re-appropriated for the purposes of and subject to the conditions stated for the  
 corresponding item in section 2 of the general appropriation act for fiscal year 2012. The  
 unexpended balance of all appropriations in the Massachusetts management accounting and  
 reporting system with a secretariat code of 01 or 17, are hereby re-appropriated for the purposes  
 of and subject to the conditions stated for the corresponding item in section 2 of chapter 68 of the  
 acts of 2011. However, for items which do not appear in section 2 of the general appropriation  
 act, the amounts in this section are re-appropriated for the purposes of and subject to the  
 conditions stated for the corresponding item in section 2 or 2A of this act or in prior  
 appropriation acts. Amounts in this section are re-appropriated from the fund or funds  
 designated for the corresponding item in section 2 of the general appropriation act; provided,  
 however, that for items which do not appear in section 2 of the general appropriation act, the  
 amounts in this section are re-appropriated from the fund or funds designated for the  
 corresponding item in section 2 or 2A of this act or in prior appropriation acts.

DISTRICT ATTORNEY

*Berkshire District Attorney*

0340-1102 .....\$194,134

EXECUTIVE OFFICE FOR ADMINISTRATION AND FINANCE

*Office of the Secretary of Administration and Finance*

1599-2013 .....\$617,000

SECTION 2E. To provide for certain unanticipated obligations of the commonwealth, to provide  
 for an alteration of purpose for current appropriations, and to meet certain requirements of law, the sums  
 set forth in this section are hereby appropriated for transfer from the General Fund to the trust funds

named within each item unless specifically designated otherwise in this section, for the purposes and subject to the conditions specified in this section and subject to the laws regulating the disbursement of public funds for the fiscal year ending June 30, 2012. Items in this section shall not be subject to allotment under section 9B of chapter 29 of the General Laws or reduction under section 9C of said chapter 29, without express authorization from the general court. Notwithstanding section 19A of said chapter 29, any transfer under this section shall be made by the comptroller in accordance with a transfer schedule to be developed for each item by the comptroller, after consulting with the appropriate agency secretary, the secretary of administration and finance and the state treasurer. The schedule for each appropriation shall provide for transfers in increments considered appropriate to meet the cash flow needs of each fund and all transfers under the schedule shall be completed not later than June 30, 2012. Not later than 7 days after the schedules receive final approval by the comptroller, they shall be reported to the house and senate committees on ways and means.

#### OFFICE OF THE STATE COMPTROLLER

##### *Office of the State Comptroller*

1595-1067 For an operating transfer to the Delivery System Transformation Initiatives Trust Fund established in section 35WW of chapter 10 of the General Laws; provided, that these funds shall be expended pursuant to the Delivery System Transformation Initiative Master Plan and hospital-specific plans approved in the MassHealth section 1115 demonstration for fiscal year 2012; provided further, that all payments from the Delivery System Transformation Initiatives Trust Fund shall be subject to the availability of federal financial participation, shall be made only in accordance with federally approved payment methods, shall be consistent with federal funding requirements and all federal payment limits as determined by the secretary of health and human services and shall be subject to the terms and conditions of an agreement with the executive office of health and human services; and provided further, that the secretary of health and human services shall make payments of up to \$44,853,333 from the Delivery System Transformation Initiatives Fund to the Cambridge Public

142 Health Commission for fiscal year 2012 only after the Cambridge Public Health  
143 Commission transfers up to \$22,426,667 of its funds to the Delivery System  
144 Transformation Initiatives Trust Fund using a federally permissible source of funds  
145 which shall fully satisfy the non-federal share of such  
146 payment.....\$186,907,667

147  
148 **SECTION 3.** Section 14A of chapter 6A of the General Laws, as appearing in the 2010 Official  
149 Edition, is hereby amended by striking out, in line 28, the word "and".

150 **SECTION 4.** Said section 14A of said chapter 6A, as so appearing, is hereby further amended  
151 by inserting after the word "boards", in line 32, the following words:-  
152 ; and (7) manage all information technology resources within the departments listed in  
153 subsection (a), including, but not limited to, all resources necessary to implement a longitudinal  
154 data system to coordinate the collection and analysis of educational data from pre-kindergarten  
155 programs through higher education, and oversee the departments' compliance with all standards  
156 and policies of the information technology division.

157 **SECTION 5.** The first paragraph of subsection (d) of section 4A of chapter 7 of the General  
158 Laws is hereby amended by striking out, in the first sentence, added by section 11 of chapter 68  
159 of the acts of 2011, and inserting in place thereof the following sentence:- The division may also  
160 offer information technology services to municipalities, authorities, constitutional offices other  
161 political subdivisions of the commonwealth and other states of the United States where the  
162 provision of these services to other states will decrease the costs or improve the efficiency of the  
163 services provided by the information technology division to the commonwealth.

**SECTION 6.** Section 22 of said chapter 7 is hereby amended by striking out, in line 20, as appearing in the 2010 Official Edition, the figure "\$5,000" and inserting in place thereof the following figure:- \$10,000.

**SECTION 7.** Chapter 10 of the General Laws is hereby amended by inserting after section 35SS the following 2 sections:-

Section 35TT. There shall be established and set up on the books of the commonwealth a separate fund to be known as the Money Follows the Person Rebalancing Demonstration Grant Trust Fund, which shall be administered by the secretary of health and human services. Amounts from the trust fund shall be used for expenses that primarily benefit individuals who have a disability, long-term illness or who are elders. The comptroller shall credit to the trust fund an amount equal to the amount of federal financial participation received by the commonwealth on money follows the person qualified, demonstration or supplemental services under the terms and conditions of the money follows the person rebalancing demonstration as determined by a federally approved list of home and community based long-term services and supports and federally approved allocation methodologies for home and community based long-term services and supports purchased through capitated arrangements. The funds shall be used to fund slots for participants in the 2 new money follows the person home and community-based waiver programs established to support the commonwealth's rebalancing initiative. The secretary may authorize expenditures of amounts from the trust fund without further appropriation. The comptroller shall transfer to the trust fund no later than the tenth business day of each quarter, an amount equal to the amount of enhanced federal financial participation collected from the previous quarter. The secretary may certify for payment amounts in anticipation of federal revenues collected for the corresponding quarter during the previous fiscal year. For the purpose



187 of accommodating timing discrepancies between the receipt of revenues and related  
188 expenditures, the secretary may incur expenses, after written approval from the secretary of  
189 administration and finance, and the comptroller shall certify for payment, amounts not to exceed  
190 the most recent revenue estimate as certified by the MassHealth director, as reported in the state  
191 accounting system.

192 Section 35UU. There shall be established and set up on the books of the commonwealth a  
193 separate fund to be known as the Delivery System Transformation Initiatives Trust Fund, which  
194 shall be administered by the secretary of health and human services. Monies from the trust fund  
195 may be expended for delivery system transformation initiatives payments to qualifying providers  
196 under an approved federal waiver. Amounts credited to the trust fund shall not be subject to  
197 further appropriation.

198 **SECTION 8.** Chapter 29 of the General Laws is hereby amended by striking out section 2000,  
199 as appearing in the 2010 Official Edition, and inserting in place thereof the following section:-

200 Section 2000. There is hereby established and set up on the books of the commonwealth a  
201 separate fund to be known as the Commonwealth Care Trust Fund, in this section called the trust  
202 fund. The secretary of administration and finance shall be the trustee of the fund and shall  
203 expend money in the fund for the purposes described herein.

204 There shall be credited to the trust fund: (a) all contributions collected under section 188 of  
205 chapter 149; (b) all revenue from surcharges imposed under section 18B of chapter 118G; (c)  
206 any transfers from the Health Safety Net Trust Fund, established by section 36 of chapter 118G;  
207 (d) revenue deposited from penalties collected under chapter 111M, and (e) any revenue from

appropriations or other monies authorized by the general court and specifically designated to be credited to the fund. Amounts credited to the trust fund shall be expended without further appropriation for programs administered by the commonwealth health insurance connector authority pursuant to chapter 176Q that are designed to increase health coverage for residents of the commonwealth. Money from the trust fund may be transferred to the Health Safety Net Trust Fund, established by section 36 of chapter 118G, or any successor fund, as necessary to provide payments to acute hospitals and community health centers for reimbursable health services. Not later than January 1, the comptroller shall report an update of revenues for the current fiscal year and prepare estimates of revenues to be credited to the trust fund in the subsequent fiscal year. The comptroller shall file this report with the secretary of administration and finance, the secretary of the executive office of health and human services, the joint committee on health care financing, and the house and senate committees on ways and means. Money remaining in the fund at the end of a fiscal year shall not revert to the General Fund; provided, however, that the comptroller shall report the amount remaining in the fund at the end of each fiscal year to the house and senate committees on ways and means.

**SECTION 9.** Section 19 of chapter 32B of the General Laws, as so appearing, is hereby amended by striking out, in lines 165 to 167, as so appearing, the words “not later than October 1 of each year and the transfer of subscribers to the commission shall take effect on the following July 1” and inserting in place thereof the following words:- on or before December 1 of each year for transfer of subscribers to the commission effective the following July 1, or on or before July 1 of each year for transfer of subscribers to the commission effective the following January 1.

**SECTION 10.** The first sentence of subsection (a) of section 21 of said chapter 32B, as appearing in section 3 of chapter 69 of the acts of 2011, is hereby amended by inserting after the word “meeting” the following words:- or by vote of the district’s governing board.

**SECTION 11.** The second sentence of subsection (a) of section 23 of said chapter 32B, as so appearing, is hereby amended by striking out the words “and the transfer of subscribers to the commission shall take effect on the following July 1” and inserting in place thereof the following words:- for transfer of subscribers to the commission effective the following July 1, or on or before July 1 of each year for transfer of subscribers to the commission effective the following January 1.

**SECTION 12.** Section 51H of chapter 111 of the General Laws, as appearing in the 2010 Official Edition, is hereby amended by striking out subsection (d) and inserting in place thereof the following subsection:-

(d) The department shall promulgate regulations prohibiting a health care facility from charging or seeking reimbursement for services provided as result of the occurrence of a serious reportable event. Except as the executive office of health and human services otherwise provides for services to MassHealth members consistent with section 2702 of the Patient Protection and Affordable Care Act (P.L. 111-148), a health care facility shall not charge or seek reimbursement for a serious reportable event that the facility has determined, through a documented review process, and under regulations promulgated by the department, was (i) preventable; (ii) within its control; and (iii) unambiguously the result of a system failure based on the health care provider’s policies and procedures; provided, however, for services to MassHealth members, the health

care facility shall perform this documented review process and determination solely for purposes of reporting to the department.

**SECTION 13.** Section 51H of chapter 111 of the General Laws, as appearing in section 65 of chapter 451 of the acts of 2008, is hereby amended by striking out subsection (d) and inserting in place thereof the following subsection:-

(d) The department shall promulgate regulations prohibiting a health care facility from charging or seeking reimbursement for services provided as result of the occurrence of a serious reportable event. Except as the executive office of health and human services otherwise provides for services to MassHealth members consistent with section 2702 of the Patient Protection and Affordable Care Act (P.L. 111-148), a health care facility shall not charge or seek reimbursement for a serious reportable event that the facility has determined, through a documented review process, and under regulations promulgated by the department, was (i) preventable; (ii) within its control; and (iii) unambiguously the result of a system failure based on the health care provider's policies and procedures; provided, however, for services to MassHealth members, the health care facility shall perform this documented review process and determination solely for purposes of reporting to the department.

**SECTION 14.** The eighth paragraph of section 2 of chapter 112 of the General Laws, as appearing in the 2010 Official Edition, is hereby amended by adding the following sentences:-

The board also shall require, as a condition of granting or renewing a physician's certificate of registration, that the physician apply to participate in the medical assistance program administered by the commonwealth's secretary of health and human services in accordance with chapter 118E and Title XIX of the Social Security Act and any federal demonstration or waiver

relating to such medical assistance program for the limited purpose of ordering and referring services covered under such program, provided that regulations governing such limited participation are promulgated under chapter 118E. A physician who chooses to participate in such medical assistance program as a provider of services shall be deemed to have fulfilled this requirement.

**SECTION 15.** Section 16 of said chapter 112, as so appearing, is hereby amended by inserting after the third paragraph the following paragraph:-

Notwithstanding the foregoing, the board shall require as a condition of granting or renewing a podiatrist's certificate of registration, that the podiatrist apply to participate in the medical assistance program administered by the commonwealth's secretary of health and human services in accordance with chapter 118E and Title XIX of the Social Security Act and any federal demonstration or waiver relating to such medical assistance program for the limited purpose of ordering and referring services covered under such program, provided that regulations governing such limited participation are promulgated under chapter 118E. A podiatrist who chooses to participate in such medical assistance program as a provider of services shall be deemed to have fulfilled this requirement.

**SECTION 16.** Section 45 of said chapter 112, as so appearing, is hereby amended by inserting after the first paragraph the following paragraph:-

The board shall require as a condition of granting or renewing a dentist's certificate of registration, that the dentist apply to participate in the medical assistance program administered by the commonwealth's secretary of health and human services in accordance with chapter 118E

and Title XIX of the Social Security Act and any federal demonstration or waiver relating to such medical assistance program for the limited purpose of ordering and referring services covered under such program, provided that regulations governing such limited participation are promulgated under chapter 118E. A dentist who chooses to participate in such medical assistance program as a provider of services shall be deemed to have fulfilled this requirement.

**SECTION 17.** Section 68 of said chapter 112, as so appearing, is hereby amended by inserting after the second paragraph the following paragraph:-

Notwithstanding the foregoing, the board shall require as a condition of granting or renewing an optometrist's certificate of registration, that the optometrist apply to participate in the medical assistance program administered by the commonwealth's secretary of health and human services in accordance with chapter 118E and Title XIX of the Social Security Act and any federal demonstration or waiver relating to such medical assistance program for the limited purpose of ordering and referring services covered under such program, provided that regulations governing such limited participation are promulgated under chapter 118E. An optometrist who chooses to participate in such medical assistance program as a provider of services shall be deemed to have fulfilled this requirement.

**SECTION 18.** The sixth paragraph of section 80B of said chapter 112, as so appearing, is hereby amended by adding the following sentences:-

The board shall require as a condition of granting or renewing authorization in advanced practice, that the nurse apply to participate in the medical assistance program administered by the commonwealth's secretary of health and human services in accordance with chapter 118E and

315 Title XIX of the Social Security Act and any federal demonstration or waiver relating to such  
316 medical assistance program for the limited purpose of ordering and referring services covered  
317 under such program; provided that, regulations governing such limited participation are  
318 promulgated under chapter 118E. A nurse practicing in an advanced practice nursing role who  
319 chooses to participate in such medical assistance program as a provider of services shall be  
320 deemed to have fulfilled this requirement.

321 **SECTION 19.** Section 9 of chapter 118E of the General Laws, as so appearing, is hereby  
322 amended by inserting after the second paragraph the following paragraph:-

323 The secretary of the executive office of health and human services may design, establish and  
324 administer a Basic Health Program pursuant to and in conformity with the provisions of federal  
325 law including 42 U.S.C Sec. 18051. Enrollment into the Basic Health Program may begin no  
326 earlier than January 1, 2014. Any such program shall be subject to regulations promulgated by  
327 the executive office provided that such program shall be available to residents of the  
328 commonwealth who are United States citizens and lawfully present aliens, to the extent  
329 permitted by federal law, whose household income is 200 per cent or less of the federal poverty  
330 level as calculated pursuant to the regulations of the executive office.

331 **SECTION 20.** Said chapter 118E is hereby further amended by inserting after section 9E the  
332 following section:-

333 Section 9F. (a) The secretary of the executive office may establish, subject to appropriation, all  
334 required federal approvals and agreements, and the availability of federal financial participation,  
335 a program, known as the Demonstration to Integrate Care for Dual Eligible Individuals,

hereinafter referred to as the Duals Demonstration, for Massachusetts residents, aged 21 through 64 at the time of enrollment, who are dually eligible for benefits under MassHealth Standard or CommonHealth and Medicare under Title XVIII of the Social Security Act and do not have any additional comprehensive health coverage. Under the Duals Demonstration, the executive office, jointly with the federal centers for Medicare and Medicaid services, shall contract with entities, to be known as Dual Eligible Integrated Care Organizations, hereinafter referred to as ICO, to provide integrated, comprehensive Medicaid and Medicare services including medical, behavioral health and long term support services for a prospective blended payment from the executive office and the centers for Medicare and Medicaid.

(b) Notwithstanding any general or special law to the contrary, the secretary of health and human services may review a request for financial solvency certification by a care delivery organization based in the commonwealth applying to serve as a Medicare plan caring for residents of the commonwealth who are dually eligible for Medicare and Medicaid. Upon determination that appropriate financial standards, which may be the standards already in place for organizations with contracts pursuant to this section, have been met, the secretary shall so certify to the centers for Medicare and Medicaid services. The secretary may require the requesting organization to pay a reasonable certification fee.

(c ) No contract to provide ICO services under this section shall constitute the business of insurance and no such plan shall be subject to chapters 175 to 176O, inclusive. Nothing in this paragraph shall affect the legal status or obligations under such insurance laws of any entity otherwise constituting or conducting the business of insurance for any other purpose.



**SECTION 21.** Chapter 176G of the General Laws is hereby amended by striking out section 16A, as appearing in the 2010 Official Edition, and inserting in place thereof the following section:-

Section 16A. The commissioner shall not disapprove a health maintenance contract:

(1) if it complies with the requirements of 42 U.S.C. Sec. 18022(e); or

(2) on the basis that it includes a deductible that is consistent with the requirements for a high deductible plan as defined in section 223 of the Internal Revenue Code and implementing regulations or guidelines; provided, however, that the maximum deductible shall not be greater than the maximum annual contribution to a health savings account permitted under section 223 of the Internal Revenue Code. A deductible equal to the maximum annual contribution to a health savings account shall only be approved for products which include a health savings account permitted under said section 223 of the Internal Revenue Code.

**SECTION 22.** Section 1 of chapter 176J of the General Laws, as so appearing, is hereby amended by inserting after the definition of "Adjusted average market premium price" the following definition:-

"Affordable Care Act," the federal Patient Protection and Affordable Care Act, Public Law 111-148, adopted March 23, 2010, as amended by the federal Health Care and Education Reconciliation Act of 2010, Public Law 111-152, and federal regulations adopted pursuant to that Act.

**SECTION 23.** Said section 1 of said chapter 176J, as so appearing, is hereby further amended by inserting after the definition of "Carrier" the following definitions:-

378 “Catastrophic plan”, a health benefits plan limited exclusively for sale to eligible individuals who  
379 also meet the requirements of eligibility for catastrophic plans as defined by 42 U.S.C. Sec.  
380 18022(e) and whose premium rates are consistent with section 3 of chapter 176J.

381 “Child-only plan”, a health benefits plan limited exclusively for sale to eligible children in  
382 accordance with 42 U.S.C. Sec. 300gg-6(c) and U.S.C. Sec. 18022(f) and whose premium rates  
383 are consistent with section 3 of chapter 176J.

384 **SECTION 24.** Said section 1 of said chapter 176J, as so appearing, is hereby further amended  
385 by inserting after the definition of "Date of enrollment" the following definition:-

386 “Eligible child”, an eligible individual who, as of the beginning of a plan year, has not attained  
387 the age of 21 and who is seeking to enroll in a child-only plan offered by a carrier.

388 **SECTION 25.** The definition of “Eligible individual” in said section 1 of said chapter 176J, as  
389 so appearing, is hereby further amended by adding the following sentence:-

390 Unless specifically stated to the contrary, persons eligible to buy child-only plans and  
391 catastrophic plans shall be considered eligible individuals for the purposes of chapter 176J.

392 **SECTION 26.** Said section 1 of said chapter 176J, as so appearing, is hereby further amended  
393 by inserting after the definition of "Trade Act/HCTC-eligible persons" the following definition:-

394 “Transitional reinsurance program”, a 3-year temporary reinsurance program, as further  
395 described in Section 1341 of the Affordable Care Act.

**SECTION 27.** Paragraph (1) of subsection (a) of section 4 of said chapter 176J, as so appearing, is hereby amended by inserting at the end thereof the following sentence:-

Notwithstanding the foregoing, this section shall not apply to health benefit plans sold exclusively as child-only plans or catastrophic plans.

**SECTION 28.** Chapter 176J of the General Laws is hereby further amended by striking out section 8, as so appearing, and inserting in place thereof the following section:-

Section 8. The commissioner shall have the authority to study the implementation of, establish, if warranted, and supervise of a Transitional Reinsurance Program, according to section 1341 of the federal Affordable Care Act, or, if the commissioner believes that such program is not appropriate for the commonwealth, to apply for any appropriate waiver from the requirement to implement such program. The commissioner may promulgate regulations to enforce the provisions of this section.

**SECTION 29.** Chapter 176O of the General Laws is hereby amended by adding the following section:-

Section 22. Notwithstanding any other general or special law, each carrier shall require, as a condition of participation in the carrier's provider network by any physician, dentist, optometrist, podiatrist and nurse practicing in an advance practice nursing role, that such provider also apply to participate in the medical assistance program administered by the commonwealth's secretary of health and human services in accordance with chapter 118E and Title XIX of the Social Security Act and any federal demonstration or waiver relating to such medical assistance program for the limited purpose of ordering and referring services covered under such program, provided that regulations governing such limited participation are promulgated under chapter

118E. Any such provider who chooses to participate in such medical assistance program as a provider of services shall be deemed to have fulfilled this requirement.

**SECTION 30.** Section 1 of chapter 176Q of the General Laws, as appearing in the 2010 Official Edition, is hereby amended by inserting after the word “chapter 176G”, in line 12, the following words:-

; a dental service corporation organized under chapter 176E; a non-profit optometric service plan organized under chapter 176F.

**SECTION 31.** Said section 1 of said chapter 176Q, as so appearing, is hereby further amended by inserting after the definition of “Carrier” the following 2 definitions:-

“Catastrophic plan”, a health benefits plan limited exclusively for sale to eligible individuals who also meet the requirements of eligibility for catastrophic plans as defined by 42 U.S.C. 18022(e) and whose premium rates are consistent with section 3 of chapter 176J.

“Child-only plan”, a health benefits plan limited exclusively for sale to eligible children in accordance with 42 U.S.C. Sec. 300gg-6(c) and U.S.C. Sec. 18022(f) and whose premium rates are consistent with section 3 of chapter 176J.

**SECTION 32.** Said section 1 of said chapter 176Q, as so appearing, is hereby further amended by inserting after the definition of “Division” the following definition:-

“Eligible child”, an eligible individual who, as of the beginning of a plan year, has not attained the age of 21 and who is seeking to enroll in a child-only plan offered by a carrier.

**SECTION 33.** Said section 1 of said chapter 176Q, as so appearing, is hereby further amended by striking out the definition of “Premium assistance payment” and inserting in place thereof the following two definitions:-

“Premium assistance payment”, a payment made to carriers or individuals by the connector to offset the value of a health benefit plan premium.

“Point-of-service cost-sharing subsidy”, a payment made to carriers or individuals by the connector to offset point-of-service cost-sharing expenses of an individual, which shall include, but not be limited to, copayments, coinsurance and deductibles.

**SECTION 34.** Section 1 of said chapter 176Q, as so appearing, is hereby further amended by inserting after the definition of “Rating factor” the following 2 definitions:-

“Stand alone dental plan”, a non-profit dental service plan offered by a licensed dental service corporation, as those terms are defined in section 1 of chapter 176E, offered independently of a health benefit plan offered through the connector, or offered by (1) an insurer licensed or otherwise authorized to transact accident and health insurance under chapter 175; (2) a nonprofit hospital service corporation organized under chapter 176A; or (3) a nonprofit medical service corporation organized under chapter 176B.

“Stand alone vision plan”, a non-profit optometric service plan offered by a licensed optometric service corporation, as those terms are defined in section 1 of chapter 176F, offered independently of a health benefit plan offered through the connector, or offered by (1) an insurer licensed or otherwise authorized to transact accident and health insurance under chapter 175; (2)

456 a nonprofit hospital service corporation organized under chapter 176A; or (3) a nonprofit  
457 medical service corporation organized under chapter 176B.

458 **SECTION 35.** Section 3 of said chapter 176Q, as so appearing, is hereby amended by inserting  
459 after the word “ plans”, in lines 13, 41 and 44the following words:-

460 and stand alone vision or stand alone dental or dental plans.

461 **SECTION 36.** Said section 3 of said chapter 176Q, as so appearing, is hereby further amended  
462 by inserting after the words “coverage”, in line 34, the following words:-

463 or stand alone vision or stand alone dental or dental insurance coverage.

464 **SECTION 37.** Subsection (a) of said section 3 of said chapter 176Q, as so appearing, is hereby  
465 further amended by striking out clause (14) and inserting in place thereof the following clause:-

466 (14) develop criteria for plans sold through the connector that are eligible for premium assistance  
467 payments or cost-sharing.

468 **SECTION 38.** Said section 3 of said chapter 176Q, as so appearing, is hereby further amended  
469 by striking out subsection (b) and inserting in place thereof the following subsection:-

470 (b) to determine each applicant’s eligibility for purchasing insurance offered by the connector,  
471 including eligibility for premium assistance payments or cost-sharing subsidies for applicants at  
472 or below 300 per cent of the federal poverty guidelines.

473 **SECTION 39.** Said section 3 of said chapter 176Q, as so appearing, is hereby further amended  
474 by adding the following subsection:-

475 (u) to define and establish by regulation a risk adjustment program as required by 42 U.S.C. Sec.  
476 18063.

477 **SECTION 40.** Section 4 of said chapter 176Q, as so appearing, is hereby amended by striking  
478 out subsection (a) and inserting in place thereof the following subsection:-

479 (a) The connector may only offer health benefit plans or stand alone vision or stand alone dental  
480 or dental plans to eligible individuals, eligible children and eligible small groups as defined in  
481 this chapter. Sub-connectors shall be authorized to offer all health benefit plans that the  
482 connector may offer, including all health benefit plans offered through the commonwealth care  
483 health insurance program.

484 **SECTION 41.** Section 5 of said chapter 176Q, as so appearing, is hereby amended by inserting  
485 after the word “ plans”, in lines 1, 4 and 7 the following words:-

486 and stand alone vision or stand alone dental or dental plans.

487 **SECTION 42.** Said chapter 176Q is hereby further amended by striking out section 10, as so  
488 appearing, and inserting in place thereof the following section:-

489 Section 10. The connector seal of approval shall be assigned to health benefit plans or stand  
490 alone vision or dental plans, as applicable, that the board determines (1) meet the requirements of  
491 subsection (d) of section 5; (2) provide good value to consumer; (3) offer high quality; and (4)  
492 are offered through the connector.

493 **SECTION 43.** Said chapter 176Q is hereby further amended by striking out section 11, as so  
494 appearing, and inserting in place thereof the following section:-

Section 11. When an eligible individual, eligible child or eligible small group is enrolled in the connector by a producer licensed in the commonwealth, the health plan or standalone vision or dental plan chosen by each eligible individual, eligible child or eligible small group shall pay the producer a commission that shall be determined by the board. In setting the commission for health plans, the board of the connector shall consider rates of commissions paid to producers for health plans issued under chapter 176J as of January 1, 2006.

**SECTION 44.** Section 12 of said chapter 176Q, as so appearing, is hereby amended by striking out subsection (a) and inserting in place thereof the following subsection:-

(a) The connector shall be authorized to apply a surcharge to all health benefit plans or stand alone vision or dental plans which shall be used only to pay for administrative and operational expenses of the connector; provided, however, that such a surcharge shall be applied uniformly to all health benefit plans or uniformly to all stand alone vision or stand alone dental or dental plans offered through the connector and sub-connectors; provided further that a sub-connector may charge an additional fee to be used only to pay for additional administrative and operational expenses of the sub-connector. These surcharges shall not be used to pay any premium assistance payments under the commonwealth care health insurance program, as described in chapter 118H.

**SECTION 45.** Item 1102-5600 of section 2C of chapter 304 of the acts of 2008 is hereby amended by inserting after the word “Northampton” the following words:- provided further that not less than \$300,000 shall be expended to complete a courthouse master plan for the city of New Bedford which examines the judiciary’s needs, existing court facilities and the possible reuse and expansion of the superior court into a regional justice center.



516 **SECTION 46.** Item 1599-1705 of section 2A of chapter 52 of the acts of 2011 is hereby  
517 amended by inserting after the words “June 1, 2011 storms” the following words: - and the  
518 October 2011 snowstorm.

519 **SECTION 47.** Chapter 68 of the acts of 2011 is hereby further amended by striking out item  
520 4180-1100 and inserting in place thereof the following item:-

521 4180-1100 For the Soldiers' Home in Massachusetts which may expend not more than \$425,000  
522 in revenues for facility maintenance and patient care, including personnel costs; provided, that 60  
523 per cent of all revenues generated pursuant to section 2 of chapter 90 of the General Laws  
524 through the purchase of license plates with the designation VETERAN by eligible veterans of the  
525 commonwealth, upon compensating the registry of motor vehicles for the cost associated with  
526 the license plates, shall be deposited into and for the purposes of this retained revenue account of  
527 the Soldiers' Home; provided further, that the Soldiers' Home may accept gifts, grants, donations  
528 and bequests; and provided further, that notwithstanding any general or special law to the  
529 contrary, for the purpose of accommodating timing discrepancies between the receipt of retained  
530 revenues and related expenditures, the Soldiers' Home may incur expenses and the comptroller  
531 may certify for payment amounts not to exceed the lower of this authorization or the most recent  
532 revenue estimate as reported in the state accounting system; prior appropriation continued  
533 \$425,000.

534 **SECTION 48.** Said chapter 68 is hereby further amended by striking out item 4190-1100 in its  
535 entirety and inserting in place thereof the following item:-

536 4190-1100

537 For the Soldiers' Home in Holyoke which may expend not more than \$300,000 for facility  
538 maintenance and patient care, including personnel costs; provided, that 40 per cent of all  
539 revenues generated pursuant to section 2 of chapter 90 of the General Laws through the purchase  
540 of license plates with the designation VETERAN by eligible veterans of the commonwealth,  
541 upon compensating the registry of motor vehicles for the cost associated with the license plates,  
542 shall be deposited into and for the purposes of this retained revenue account of the Soldiers'  
543 Home; provided further, that the Soldiers' Home may accept gifts, grants, donations and  
544 bequests; and provided further, that notwithstanding any general or special law to the contrary,  
545 for the purpose of accommodating timing discrepancies between the receipt of retained revenues  
546 and related expenditures, the Soldiers' Home may incur expenses and the comptroller may certify  
547 for payment amounts not to exceed the lower of this authorization or the most recent revenue  
548 estimate as reported in the state accounting system; prior appropriation continued  
549 \$300,000.

550 **SECTION 49.** Item 4400-1000 of section 2 of said chapter 68 is hereby amended by adding the  
551 following words:-

552 ; provided further, that the commissioner of the department of transitional assistance may  
553 transfer funds for identified caseload-related deficiencies between items, 4403-2000, 4405-2000  
554 and 4408-1000.

555 **SECTION 50.** Item 1599-0026 of section 2 of said chapter 68 is hereby amended by adding the  
556 following words:-

557 provided further, that any unexpended funds made available under this item shall not revert on  
558 June 30, 2012 but shall remain available for expenditure until June 30, 2013.

**SECTION 51.** Item 9110-2500 of section 2 of said chapter 68 is hereby amended by adding the following words:-

provided, that for the purpose of accommodating timing discrepancies between the receipt of retained revenues and related expenditures, the department may incur expenses and the comptroller may certify for payment amounts not to exceed the lower of this authorization or the most recent revenue estimate as reported in the state accounting system.

**SECTION 52.** Item 1599-6152 of section 2E of said chapter 68 is hereby amended by adding the following words:-

; provided further, that notwithstanding any general or special law to the contrary, if the secretary of administration and finance determines that amounts transferred from the General Fund to the State Retiree Benefits Trust Fund are not needed to support the costs of the state employees' retirement system for health care and other non-pension benefits for retired members of the system in fiscal year 2012, the secretary of administration and finance shall notify the comptroller and the house and senate committees on ways and means of this determination and the comptroller shall transfer such amounts from the State Retiree Benefits Trust Fund back to the General Fund; and provided further, that notwithstanding any general or special law to the contrary, that the comptroller shall transfer funds under this item to item 1108-5200, with the written approval of the secretary of administration and finance, for the purpose of offsetting employee premium contributions incurred within item 1108-5200 until June 30, 2012.

**SECTION 53.** Notwithstanding any general or special law to the contrary, funds appropriated in line item 4000-0265 in chapter 142 of the acts of 2011 shall be expended pursuant to the following: the appropriation in item 4000-0265 in chapter 142 of the acts of 2011 shall be

equally distributed to the teaching community health centers with a family medicine residency program in the cities of Fitchburg, Worcester, Lawrence and the community of South Boston no later than May 15, 2012. In addition the secretary of the executive office of health and human services shall designate an agency to administer the funds and shall retain 5 per cent of the total funds for the following purposes: (1) to report to the house and senate committees on ways and means and the executive office of health and human services on the use of the funds by community teaching health centers; (2) to audit such centers in order to confirm the use of said funds by each center for training purposes; and (3) to study and produce a report by September 15, 2012 on the status and needs of teaching health centers throughout the commonwealth to be submitted to the house and senate committees on ways and means and the secretary of the executive office of health and human services.

**SECTION 54.** Notwithstanding any general or special law to the contrary, the Massachusetts Bay Transportation Authority or any successor, shall enter into an agreement to establish or amend existing defined benefit retirement or pension benefits only if any employee hired after the effective date of the agreement or amendment may not receive a subsidized early retirement benefit or a subsidized early retirement pension benefit prior to the completion of 25 years of credited pension service and attainment of 55 years of age. An early retirement benefit or early retirement pension benefit will be considered to be subsidized if the benefit amount is reduced less than one-half per cent for each month , 6 per cent for each year, the pension begins prior to the employee's normal retirement date, or such higher percentage reduction that may be incorporated into the benefit percentage multipliers contained in the table entitled "Table Showing Percentage of the Amount of Average Annual Rate of Regular Compensation to be multiplied by the Number of Years of Creditable Service for individuals who become members

on or after April 2, 2012,” under section 5 of chapter 32 of the General Laws. The Massachusetts Bay Transportation Authority is not prohibited by this section from permitting retirement prior to attaining age 55; provided, however, that either: (1) the employee is entitled to a disability pension under the Massachusetts Bay Transportation Authority retirement system; or (2) the employee has earned the maximum percentage allowed under the retirement formula of the Massachusetts Bay Transportation Authority retirement system and that the employee waives the ability to collect a pension and retirement benefit until attaining age 55.

**SECTION 55.** (a) Notwithstanding the bidding requirements set forth in section 39M of chapter 30 of the General Laws, chapter 149 of the General Laws, chapter 149A of the General Laws or any other general or special law to the contrary, the Massachusetts Bay Transportation Authority is authorized to utilize the Construction Manager/General Contractor project delivery method, hereinafter referred to in this section as CM/GC, for the green line extension project, located in Boston, Cambridge, Somerville, and Medford, as a CM/GC pilot project. The pilot project shall emphasize an integrated team approach to the planning, design, and construction of the green line extension, and shall control schedule, budget, and risk allocation, while ensuring a quality end product for the project owner. The pilot project shall include engagement of construction expertise in the pre-construction process to enhance constructability, manage risk, and facilitate execution of design and construction.

(b) The CM/GC procurement procedures shall be included in a CM/GC pilot project procedures manual which shall be developed by the Massachusetts Bay Transportation Authority in consultation with, and approved by, the office of the inspector general. Prior to approving said procedures manual, the office of the inspector general shall seek input and comment on the procedures manual from the Construction Industries of Massachusetts.

627 Any proposed revisions to said CM/GC green line extension procedures manual shall be  
628 submitted to the office of the inspector general for review and approval. Prior to approving any  
629 proposed revisions, the office of the inspector general shall seek input and comment on the  
630 revisions from the Construction Industries of Massachusetts.

631 (c) The procurement procedures shall encourage participation by qualified firms through a  
632 qualifications and price-based process, and shall include requests for proposals, technical scores  
633 and price components, and criteria for prequalification, which shall include minimum levels of  
634 experience, financial capability, bonding capacity, demonstrated commitment to obtaining  
635 meaningful disadvantaged business enterprise participation during all phases of the CM/GC  
636 process, workforce diversity, and other criteria deemed appropriate for evaluation, selection, and  
637 award by the Massachusetts Bay Transportation Authority board of directors.

638 (d) The CM/GC shall be required to self-perform construction work amounting to not less than  
639 50 per cent of the total construction contract price, except that any items designated in the  
640 construction contract as “specialty items” may be performed by subcontract and the cost of any  
641 such specialty items so performed by subcontracts shall be deducted from the total cost  
642 computing the amount of work required to be performed by the CM/GC with his/her own  
643 organization. A listing of items considered to be “specialty items” will be included in the request  
644 for proposal.

645 (e) The provisions of the General Laws generally applicable to public works projects procured by  
646 the Massachusetts Bay Transportation Authority including, but not limited to, sections 39F, 39G,  
647 39H, 39J, 39M except the first sentence of subsection (a), 39N, 39O, 39P and 39R of chapter 30

648 of the General Laws and sections 26, 27, 27A, 27B, 27C, 27D, 27F, 34A and 44H of chapter 149  
649 of the General Laws shall apply to the pilot project.

650 (f) In developing, modeling, and implementing the CM/GC project delivery method, the  
651 Massachusetts Bay Transportation Authority shall follow the principles and provisions of the  
652 General Laws set forth in subsection (e) generally applicable to public works projects.

653 (g) The Massachusetts Bay Transportation Authority shall establish, in consultation with the  
654 office of the inspector general and the federal transit administration, such additional procurement  
655 requirements, procedures, and project standards as are necessary to encourage full competition  
656 and best construction practices. The general manager of the Massachusetts Bay Transportation  
657 Authority, or a designee, may consult with legal, financial, technical and other experts within and  
658 outside state government in the implementation of this section.

659 (h) Within 2 years of the enactment of this section, every 2 years during the term of the project,  
660 and within 6 months of completion of construction of the project, the general manager of the  
661 Massachusetts Bay Transportation Authority shall file a report with the house and senate  
662 committees on ways and means, the joint committee on transportation and the clerks of the house  
663 of representatives and senate. Said reports shall evaluate the selection process of the CM/GC, the  
664 preconstruction phase services provided by the CM/GC, the effectiveness of the CM/GC as the  
665 project transitions through 1 or multiple guaranteed maximum price negotiations leading to the  
666 contracting for the full scope of construction, and an evaluation of the construction phase  
667 services provided by the CM/GC. Each report shall include, but not be limited to, a  
668 determination of the following aspects for the project:

- (1) whether any CM/GC “best-value” selection criteria, procedures, or requirements set forth in the CM/GC pilot project procedures manual should be revised to improve the outcome of the project, the rationale for the improvements, and recommended revisions;
- (2) whether tangible benefits were achieved from the CM/GC’s input into the preconstruction services phase of the project, based on a comparison of traditional procurement delivery methods, and examples of any such benefits;
- (3) the planned or budgeted cost and duration of preconstruction services, the actual cost and duration of the preconstruction services, and a summary of any significant variances of greater than 20 per cent between them;
- (4) an assessment of whether the CM/GC’s preconstruction services expedited the completion of the design and streamlined the design phase by reducing detailed engineering, which is not required for non-critical aspects of the design, and improved the constructability of the project;
- (5) an evaluation of the CM/GC’s overall quality of work during construction, including management of the construction materials and installation and the level of punch-list work required, and a determination of whether the CM/GC’s overall quality of work during construction is directly proportional to the quality of the CM/GC’s input during design;
- (6) a comparison of the original guaranteed maximum price to the final or adjusted guaranteed maximum price, at the completion of the project, or of each interim guaranteed maximum price, if applicable. This comparison shall be inclusive of all the realized expenditures, for all of the authorized changes beyond the scope of the original guaranteed



maximum price, and shall include a narrative to explain the rationale for any significant variances within each of the main cost centers of the project;

(7) an assessment of the effectiveness of any interim guaranteed maximum price that was issued to start and maintain critical construction progress, including any negative and positive impacts of allowing a CM/GC to proceed on aspects of construction without a guaranteed maximum price for the total project scope;

(8) a detailed evaluation of the CM/GC's performance, including, but not limited to, the CM/GC's communication with the designer-of-record and the awarding authority, cooperation with the rest of the project team members and stakeholders, effectiveness of input during the design, ability or willingness to successfully negotiate reasonable and comprehensive GMP's, general contracting effectiveness, quality of construction, cost estimating skill sets, willingness to work on solutions instead of claims, ability to recover from schedule delays, and the ability to complete the project as efficiently as possible;

(9) an identification of any bid protest filed as a result of the use of the CM/GC project delivery method, the decision, and a detailed explanation of the rationale for the decision; and

(10) an assessment of whether and in what ways the CM/GC procurement process, procedures, or requirements set forth in the CM/GC pilot project procedures manual have impacted disadvantaged business enterprise and small business contracting opportunities.

The final report for the pilot project shall include a recommendation of whether it would be beneficial for the commonwealth to utilize the construction approach authorized in this section in conjunction with other construction projects.

(i) Paragraphs (a) to (g), inclusive, shall not limit the general powers of the Massachusetts Bay Transportation Authority provided in chapter 161A of the General Laws. Said paragraphs shall effectuate the purposes of implementing the CM/GC pilot project.

(j) The general manager of the Massachusetts Bay Transportation Authority may delegate any of the powers conferred on him by this section to a designee, but the general manager shall not delegate the power to award the CM/GC pilot project contract which shall be exclusively vested in the board of directors of the Massachusetts Bay Transportation Authority.

(k) Notwithstanding any provisions in this section to the contrary, upon the expenditure of one hundred million dollars for the green line extension project the secretary of administration and finance and the secretary of transportation shall file a report with the office of the inspector general, house and senate committees on ways and means, the joint committee on transportation and the clerks of the house of representatives and senate that reviews the success of the CM/GC procurement method and certifies their approval of said procurement method for subsequent expenditures or phases of the green line extension project.

**SECTION 56.** Notwithstanding any general or special law or rule or regulation to the contrary, any unexpended balances, not exceeding a total of \$18,000,000, in items 4000-0600 and 4000-0700 of section 2 of chapter 68 of the acts of 2011, shall not revert to the General Fund until September 1, 2012, and may be expended by the executive office of health and human services to pay for services enumerated in the aforementioned line items provided during fiscal year 2012.

**SECTION 60.** The salary adjustments and other cost items authorized by the following 2011 amendments to collective bargaining agreements, for the period from July 1, 2011 to June 30, 2014, shall be effective for the purpose of section 7 of chapter 150E of the General Laws:

- (a) between the Barnstable Sheriff and Barnstable Correction Officers, BCCOU;
- (b) between the Barnstable Sheriff and Barnstable Radio Operators, IBCO Local 217;
- (c) between the Barnstable Sheriff and Barnstable Nurses, NAGE Local 58;
- (d) between the Barnstable Sheriff and Barnstable Clerical, NAGE Local 220;
- (e) between the Dukes Sheriff and Dukes Correction Officers, MCOFU;
- (f) between the Essex Sheriff and Essex County Correction Officers Association;
- (g) between the Essex Sheriff and Essex Administrators, IBCO Local R1-27;
- (h) between the Suffolk Sheriff and Suffolk Captains, AFSCME Locals 3967 and 3643;
- (i) between the Board of Higher Education and the American Federation of State, County and Municipal Employees Local 1067;
- (j) between the commonwealth and the National Association of Government Employees Local R1 292, Unit A;
- (k) between the commonwealth and SEIU Local 888, for the Berkshire registry of deeds;
- (l) between the commonwealth and OPEIU Local 6, for the Middlesex North registry of deeds;
- (m) between the commonwealth and OPEIU Local 6, for the Middlesex South registry of deeds; and
- (n) between the commonwealth and OPEIU Local 6, for the Hampden registry of deeds.

**SECTION 61.** Notwithstanding any general or special law to the contrary, the secretary of health and human services, with the written approval of the secretary of administration and finance, may authorize transfers of surplus among items 4000-0320, 4000-0430, 4000-0500, 4000-0600, 4000-0700, 4000-0870, 400-0875, 4000-0880, 4000-0890, 4000-0895, 4000-0950, 4000-0990, 4000-1400, 4000-1405 and 4000-1420 of section 2 of chapter 68 of the acts of 2011 for the purpose of reducing any deficiency in these items, but any such transfer shall be made not later than August 30, 2012.

**SECTION 62.** Notwithstanding any general or special law to the contrary, the unexpended balances of all capital accounts which otherwise would revert on June 30, 2012, but which are necessary to fund obligations during fiscal year 2013, are hereby re-authorized; but this re-authorization shall terminate upon enactment of a capital account extension law.

**SECTION 63.** Section 76 of chapter 54 of the General Laws, as appearing in the 2010 Official Edition, is hereby amended, by striking out, in line 2, the words “and, if requested,” and inserting in place thereof the following:— “, valid photo identification issued by the commonwealth of Massachusetts or the government of the United States, as defined in section 76B, and”.

**SECTION 64.** Chapter 54 of the General Laws, as so appearing, is hereby amended, by striking out section 76B in its entirety and inserting in place thereof the following section:

**Section 76B.** (a) For the purposes of this chapter, “valid photo identification” shall mean a document that:

- (1) shows the name of the individual to whom the document was issued, and the name conforms to the name of the individual's voter registration record;
- (2) shows a photograph of the individual to whom the document was issued;
- (3) includes an expiration date, and the document is not expired or expired after the date of the most recent general election; and
- (4) was issued by the commonwealth of Massachusetts or the government of the United States.

(b) (1) A person seeking to vote that does not provide sufficient valid photo identification as defined in subsection (a) of this section may be challenged under section 85 of this chapter.

(2) A person seeking to vote that does not provide valid photo identification as defined under subsection (a) of this section may cast a provisional ballot under section 76C.

(c) Nothing in this section shall be construed to deny the rights of any individual who:

(1) is entitled to vote by absentee ballot under the Uniformed and Overseas Citizens Absentee Voting Act, 42 U.S.C. sections 1973ff-1 et seq.;

(2) is provided the right to vote otherwise than in person under section 3(b)(2)(B)(ii) of the Voting Accessibility for the Elderly and Handicapped Act, 42 U.S.C. section 1973ee-1(b)(2); or

(3) is otherwise entitled by federal law to vote otherwise than in person.

SECTION 65. Section 76C of Chapter 54 of the General Laws, as so appearing, is hereby amended, by adding after subsection (k) the following new subsection:—

795 (l) A voter who fails to provide valid photo identification as defined under section 76B and casts  
796 a provisional ballot shall be required to provide such identification in person to the city or town  
797 clerk, or elections board or commission, of the municipality in which they reside, within 8  
798 business days from the date of the election in which the provisional ballot was cast. A voter who  
799 fails to provide such identification in the time specified shall forfeit that vote, and that  
800 provisional ballot shall be discarded.

801 SECTION 66: Section 92 of chapter 54 of the General Laws, as appearing in the 2010 Official  
802 Edition, is hereby amended, by adding in line 5, after the words “eighty-seven,” the following  
803 words:— “as well as enclosing in the same envelope a copy of a valid photo identification as  
804 defined in section 76B of this chapter,”.

805 SECTION 67. Section 8E of Chapter 90 of the General Laws, as appearing in the 2010 Official  
806 Edition, is hereby amended at the end of the first paragraph thereof by adding the following:-  
807 The Registry shall provide such identification cards at no cost to any applicant who is eligible to  
808 vote.

809 SECTION 68. Section 63 to 67 of this act shall take effect on April 1, 2013.

810 SECTION 69. Notwithstanding any special or general law to the contrary, the provisions of  
811 sections 63 to 68 shall not take effect until such time as the secretary of the commonwealth, in  
812 consultation with the department of revenue, has furnished a study of the impact on the revenue  
813 cost to the commonwealth and its cities and towns, including, but not limited to, a distributional  
814 analysis showing the impact on municipalities of varying population levels, the current practice  
815 of other states, any anticipated change in employment or staffing levels, to the joint committee  
816 on election laws.

817 SECTION 70. Section 55 of chapter 176 of the Acts of 2011 is hereby amended by striking the  
818 words “In paying the retirement allowance under the new election, the board, as defined in  
819 section 1 of said chapter 32, shall make appropriate adjustments, or arrange for appropriate  
820 repayments, upon such terms and condition as the board may prescribe, so as to recover any  
821 overpayments resulting from the prior election.” and inserting in place thereof:-

822 In paying the retirement allowance under the new election, the board, as defined in section 1 of  
823 said chapter 32, shall make appropriate adjustments, or arrange for appropriate repayments, so as  
824 to recover any overpayments resulting from the prior election. Any member may make a lump  
825 sum payment or installment payments over a period not exceeding five years and may, with the  
826 approval of the board, make installment payments over a period exceeding five years.

827

828 SECTION 71. Section 58 of Chapter 176 of the Acts of 2011, as amended by section 44 of  
829 Chapter 36 of the act of 2012, is hereby further amended by striking the second paragraph and  
830 inserting the following paragraph:-

831 The commission shall consist of 14 members: 1 of whom shall be the secretary of administration  
832 and finance, or the secretary’s designee; 1 of whom shall be the treasurer, or the treasurer’s  
833 designee; 1 of whom shall be the executive director of the group insurance commission, or the  
834 director’s designee; 2 of whom shall be private citizens, appointed by the governor, who shall  
835 serve as co-chairs of the commission and 1 of whom shall not be a member of any of the 105  
836 contributory retirement systems; 3 members of the house of representatives, 1 of whom shall be  
837 appointed by the minority leader; 3 of whom shall be members of the senate, 1 of whom shall be  
838 appointed by the minority leader; 1 of whom shall be selected by the governor from a list of 3

839 candidates submitted by the president of the Massachusetts AFL-CIO; 1 of whom shall be a  
840 member of the Massachusetts Municipal Association; and 1 of whom shall be a member of the  
841 Retired State, County and Municipal Employees Association of Massachusetts. The commission  
842 shall file a report of its recommendations and proposed legislation, if any, with the clerks of the  
843 house and senate, the chairs of the house and senate committee on ways and means and the  
844 chairs of the joint committee on public service not later than November 30, 2012.